### Case 6:17-cv-00166-RC-JDL Document 1 Filed 03/17/17 Page 1 of 7 PageID #: 1

PRISONER'S CIVIL RIGHTS COMPLAINT (Rev. 05/2015)

IN THE UNITED STAT	ES DISTRICT COURT US DISTRICA
FOR THE Lastern	DISTRICT COURT
1xler	_ DIVISION MAR 1 7 2017
Johnny L. Walker #/215501 Plaintiff s Name and ID Number	STERN DIST. OF TEXAS
Coffield Unit-2661FM 2054 - Place of Confinement Tenn. Colony, TX 75884	
Frace of Continement Tens. Colony, TX 25884	CASE NO. 6:17CV166 RWS/J.
	(Clerk will assign the number)
Losie Davis - Director of Texas Dept. a Defendant's Name and Address Porce David, Sr. Bld.	of Criminal Justice g209 W. 14thst., Rm. 300/ Austin, TX 73401
Defendant's Name and Address Arice Duviel, So. Bldg.	-204 W. 14th St. Rm. 500   Acester, TX 18101
Stated Liethin	- -

### INSTRUCTIONS - READ CAREFULLY

### NOTICE:

( DO NOT USE "ET AL.")

### Your complaint is subject to dismissal unless it conforms to these instructions and this form.

- 1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
- 2. Your complaint must be <u>legibly</u> handwritten, in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, <u>DO NOT USE THE REVERSE SIDE OR BACK SIDE OF ANY PAGE</u>. ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
- 3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
- 4. When these forms are completed, mail the original and one copy to the clerk of the United States district court for the appropriate district of Texas in the division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. If you are confined in the Texas Department of Criminal Justice, Correctional Institutions Division (TDCJ-CID), the list labeled as "VENUE LIST" is posted in your unit law library. It is a list of the Texas prison units indicating the appropriate district court, the division and an address list of the divisional clerks.

# Case 6:17-cv-00166-RC-JDL Document 1 Filed 03/17/17 Page 2 of 7 PageID #: 2 FILING FEE AND *IN FORMA PAUPERIS* (IFP)

- In order for your complaint to be filed, it must be accompanied by the statutory filing fee of \$350.00 plus an administrative fee of \$50.00 for a total fee of \$400.00.
- 2. If you do not have the necessary funds to pay the fee in full at this time, you may request permission to proceed in forma pauperis. In this event you must complete the application to proceed in forma pauperis, setting forth information to establish your inability to prepay the fees and costs or give security therefor. You must also include a current six-month history of your inmate trust account. If you are an inmate in TDCJ-CID, you can acquire the application to proceed in forma pauperis and the certificate of inmate trust account, also known as in forma pauperis data sheet, from the law library at your prison unit.
- 3. The Prison Litigation Reform Act of 1995 (PLRA) provides "... if a prisoner brings a civil action or files an appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." See 28 U.S.C. § 1915. Thus, the court is required to assess and, when funds exist, collect, the entire filing fee or an initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the court will apply 28 U.S.C. § 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your inmate trust account, until the entire \$350.00 statutory filing fee has been paid. (The \$50.00 administrative fee does not apply to cases proceeding *in forma pauperis*.)
- 4. If you intend to seek *in forma pauperis* status, do not send your complaint without an application to proceed *in forma pauperis* and the certificate of inmate trust account. Complete all essential paperwork before submitting it to the court.

### **CHANGE OF ADDRESS**

It is your responsibility to inform the court of any change of address and its effective date. Such notice should be marked "NOTICE TO THE COURT OF CHANGE OF ADDRESS" and shall not include any motion for any other relief. Failure to file a NOTICE TO THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedure.

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E	OS LA WSUITS.
. H	lave you filed any other lawsuit in state or federal court relating to your imprisonment? YES NO
If	f your answer to "A" is "yes," describe each lawsuit in the space below. (If there is more than one awsuit, describe the additional lawsuits on another piece of paper, giving the same information.)
<b>T</b>	Approximate date of filing lawsuit: $N/R$
2.	Parties to previous lawsuit:
	Plaintiff(s) N/A
	Defendant(s) N/A
3.	Court: (If federal, name the district; if state, name the county.) *** W/A
	Cause number: W/A
	Name of judge to whom case was assigned:
	Disposition: (Was the case dismissed, appealed, still pending?)
7.	Approximate date of disposition:

. The second	Case 6:17-cv-00166-RC-JDL Document 1 Filed 03/17/17 Page 3 of 7 PageID #: 3
ें हा शिक्षेत्र :	PLACE OF PRESENT CONFINEMENT A. H. COFFIELD with 2661 FM 2054 TELL. Colony, Tevas 75824
promote promote promote	EXHAUSTION OF GRIEVANCE PROCEDURES:
:	Have you exhausted all steps of the institutional grievance procedure?  WESNO
	Attach a copy of your final step of the grievance procedure with the response supplied by the institution.
IV.	PARTIES TO THIS SUIT:
•	A. Name and address of plaintiff: Solvmy Lee Walker 1215501
	2661 Fm 2054 - H.H. COFFIELD LIGHT
	Tennessee Colony, Texas 75884
	B. Full name of each defendant, his official position, his place of employment, and his full mailing address.
	Defendant #1: for Laws Director of T.D. C.J CIL Arice Daniels tomit
	Sc. Bldg 204 W. 14th Street RM 500, Austin Texas 78701
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.
	Deniel of Basic Mecessities of life Freedom from Inhumane conditions of confinement in Weldton ut
	Defendant #2: Bryan Callier' Executive Livetor of TACICA
	P.O.BOX 99. Huntsville Texas 77342
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.  Denial of Basic necessities of Life Freedom from Inhumane conditions of Confinement in violetian of the  8th 14th Amendment.
	Defendant #3: Jerry Catoe. Service Worden of the H.H. Coffian unit.
	2661 fm 2054. TENNESSEE Colony. Tevas 75884
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.  Device of Basic recessities of Life Freedom from Inhumane condition of Confinement in Violation of the 14th Amendment:
	Defendant #4: Jeffery Richardson. Associate Luarden of the Hit. Cofficial unit
	2661 fm 2054, TENNESSEE Colony, TEVOS 75884
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.  Berial of Basic necessities of like Freedom from Inhumane conditions of Continument in Violation of the  8th 7 14 th Amendment.
	Defendant #5: Patrick Comper. Associate Liarden of the H.H. COFFIELD unit
	2661 tm 2054 . Tennessee Colony, Texas 75884
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you. Serial at Bosic secessities of Life ! Freedom from Enhance Conditions of Continement in Volation of the

# Case 6:17-cv-00166-RC-JDL Document 1 Filed 03/17/17 Page 4 of 7 PageID #: 4 STATEMENT OF CLAIM:

State here in a short and plain statement the facts of your case, that is, what happened, where did it happen
when did it happen, and who was involved. Describe how each defendant is involved. You need not give
any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number
and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember the
complaint must be stated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY
STRIKE YOUR COMPLAINT.

	STRIKE YOUR COMPLAINT.
	This Complaint is about the TOTALITY of my living conditions - I as
	Parced to live in an inhumane envisorment athough Hyself and others over
	The years have repeatedly requested an est to these inhumane conditions
	Double-celling in a cell measuring 45 sp. Fl. or less for 24 hours per day for
	weeks at a time. 2) Sleep-Depointion on a nightly busis where I am awaken
	too loxing, mail, etc, so that I get less than 5-hours of uninterrapted sleep. 3) There
	No tolets in the disposion, which causes me to hold my bowels for 2+3hours, as we
	as be exposed to the faces of others when they defecte an the floor or on themse
,	4) Showers Overerowded with more than 100-prisoners in area designed for 60. 5.) Extreme theat with na oscillation or exhaust four in the dax of om3:- And More RELIEF: See Memorandum of lines and attacked grievance #2015151843.
,	RELIEF: See Memorandum et bies and attached grievance #2015157843
	State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or
	statutes.
Second	GENERAL BACKGROUND INFORMATION:
	A. State in complete form all names you have a second 1.1.
	A. State, in complete form, all names you have ever used or been known by including any and all aliases.
	B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.
	B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.
Secretary of Secre	B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.  SANCTIONS:
**************************************	B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.  SANCTIONS:  A. Have you been sanctioned by any court as a result of any lawsuit you have filed?  YES NO
Source State	B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.  SANCTIONS:
Source State	B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.  SANCTIONS:  A. Have you been sanctioned by any court as a result of any lawsuit you have filed?YESNO  B. If your answer is "yes," give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)  1. Court that imposed sanctions (if federal, give the district and division):
Source State	B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.  SANCTIONS:  A. Have you been sanctioned by any court as a result of any lawsuit you have filed?YESNO  B. If your answer is "yes," give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)  1. Court that imposed sanctions (if federal, give the district and division):
Source State	B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.  SANCTIONS:  A. Have you been sanctioned by any court as a result of any lawsuit you have filed?  YES NO  B. If your answer is "yes," give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)

The Totality of Double-Celling, Sleep Deprivation, the absence of toilets in the dakooms and kec-lards, Overcrowded showers, and extreme heat are subhuman living conditions, which have been repeatedly over the years been brought to the attention of the Defendants directly as well as through their agents and employees via the grienance process. The answer most often given is that coffield does not have to meet os the out that Standards because it was built prior to the 2250 stike units, and ingress and eggess is done everyhour, yet they know from Operations Review (corners) that the closes do not roll for 2 and 3-hours with logs being which the Plaintiff ask this best described as a "Third World Ghetto," Course of a major sporting event in order to get the full impact of what he is subjected to on a daily basis.

	Case 6:17-cv-00166-RC-JDL  Has any court ever warned or		•	
	. If your answer is "yes "give use anothe	wio Hewing informat	ion for every lawsuit in whic	
	1. Court that issued warning		ı i	Z
	2. Case number:		. 1 7	A
	3. Approximate date warning	g was issued:		
				-
	DATE  DATE  OFF'S DECLARATIONS		(Signature of P	laintiff)
2. 3. 4.	I declare under penalty of perj and correct. I understand, if I am released current mailing address and far I understand I must exhaust al I understand I am prohibited from civil actions or appeals (from incarcerated or detained in an frivolous, malicious, or failed imminent danger of serious ph I understand even if I am allowed filing fee and costs assessed by inmate trust account by my custom.	or transferred, it is made in the court, which shall be administration bringing an in form a judgment in a ciny facility, which late to state a claim upon tysical injury.	by responsibility to keep the sult in the dismissal of this lative remedies prior to filing ma pauperis lawsuit if I have vil action) in a court of the wsuits were dismissed on a which relief may be grant prepayment of costs, I am reall be deducted in accordance	court informed of my awsuit.  this lawsuit.  brought three or more United States while the ground they were ted, unless I am under
igned this	(Day)	of(month)	, 20 17 (year)	aintiff)

WARNING: Plaintiff is advised any false or deliberately misleading information provided in response to the above questions may result in the imposition of sanctions. The sanctions the court may impose include, but are not limited to, monetary sanctions and the dismissal of this action with prejudice.

# 2007 Lee Lalaker# 215501 2007- Copplesed

THE STATE OF THE S

United States District Court Clerk-David J. Maland 211 W. Fergusonstreet 1/1/es, TX 15702

LCAL

Walker, et. al, v. Davis, et al Evidence of Exhaustion of Administrative Remedies Exhibit A

1. Grievance # 2017048063-Step142
2. Grievance # 2015 15 1843-Step142
3. Grievance # 2016 14 93 96-Step142
4. Grievance # 2016 15 12 10-Step142
5. Grievance # 2016 15 12 10-Step142
6. Grievance # 2017073268-Step1
7. Letter John C. West, General Counsel acknowledging
Notice of Intent to Sue

8. Letter from General Coursel, Sharon Howell acknowleding Notice of Intent to Sue

9. Grievance #2015184345 - Step 1+2 10 Grievance #2016192099 - Step 1+2



### **Texas Department of Criminal Justice**

STEP 2 OFFENDER GRIEVANCE FORM	UGI Recd Date: <u>DEC 1 9 2016</u> HQ Recd Date: <u>DEC 2 7 2016</u> Date Due: <u>O   - 7 8</u>
Offender Name: 1 MAYYER JOHNING   FE TDCJ# 1715501	Grievance Code:
Unit: Market Mousing Assignment: All Aut. T 6205	Investigator ID#:
Unit where incident occurred:	Extension Date:

You must attach the completed Step 1 Grievance that has b accepted. You may not appeal to Step 2 with a Step 1 that has t signed by the Warden for your Step 2 appeal to be returned unprocessed.

**OFFICE USE ONLY** 

Grievance #: 2017049063

Give reason for appeal (Be Specific). I am dissatisfied with the response at Step 1 because
THIS IS AN OFFICIAL COMPLAINT FILES PURSUANT TO IMMATE BRIEVANCE CINE #500 LIVING CONSTITIONS (I.E. DOUBLE -
CECCINE, SLEEP DEPRIVATION, TOICETS IN THE DAYROOMS AND REC. THRY, OVERCROWNER SHOWERS, AND EXTREME HERT ) FILED
AGAINST THIS ABMINISTRATION, AS THEY HAVE BEEN REPRETEDLY REQUESTED OVER THE PAST COUPLE OF YEARS TO
EMB THESE SUBHUMANI CIVING CONDITIONS PARTICULARLY BUT LIMITED TO WARDEN COOPER, WHO HAS STATED THAT
COFFICIO BOES NOT HAVE TO MEET OSHA & ACA-STANDAR'S BECAUSE IT WAS BUILT FRICK TO THE ZZSO STYLELIGHT
AND INGRESS AND EGRESS IS DONE EVERY HOUR, YET HEKAGUS FROM OPERATION REVIEW THAT THE BOORS DO NOT
ROLL FOR Z-3 HOURS WITH LOAS BEING FAISIFIED
DOUBLE CELLING IN A CELL MEASURING 45 SQ PT. OR LESS FOR ZY HOLLAS PER-DAY FOR CLEEKS AT ATIME IS
CRUEL AND CAMBRE - SEE RUIZ N. ESTELLE 679 FRA 1115
DELEGE DEPRIVATION ON A NIGHTLY BASIS WHERE I AM ACHAREN FOR LAY-INS, MAIL, COUNT, PILLICUMDOW
AND BREAKFAST SUTHAT I GET LESS THAN 5-HOURS OF UNIVATERILATED SLEEP-SEE HARPER V. SHOWERS 174
FZG 716 AND WALKER V. SCHGLT. 7/7 F.36 179
3) ALL TO ILETS IN DRYROOM OR REC. YARD IS A SERIOUS SANITATION HATEARY AS I AM REPEATEDLY EXPOSED TO
FECES. SEE FARMER Y BREWNAN 511 US. 825, 837 43
SHOWERS ARE CONSTANTLY OVERCROWED CREATING A SAFETY AND HEACTH HAZZARD BY PLACING MIRE
THAN 100-PRISONERS IN THE SHOWER WITH ONLY GO-SHOWER-HEARS SEE RHORES Y. CHAPMAN 1015.C.
2392
SEXTREME HEAT- NO OSCILLATING OR EXHAUST FAMS IN THE BAYROOM. PAGE
THESE REPRESENT IN THEIR TOTALITY CRUEL AND UNUSAL PUNISHMENT EVEN IF THEY BO MEET
OHSA AND ACA STANDARDS - SEE HELLING N.M. KINNEY, 509 U.S. 25,32
I REQUEST TOLLETS BE INSTALLED IN THE DAYROOMS AND RECLYARDS. AND FOR CELLS ON I AND BE DESIGNATED
AS SUCH MATTIC THEY ARE INSTALLED 'S REQUEST HOLRLY INGRESS AND EGPESS'S REQUEST COCKLATING AND EXHAUST INCRESS OF THIS FORM (OVER)

Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/17 Page 3 of 31 PageID #: 10

FAMS BE INSTALLED -IN EACH BAYROOM, AND I REQUEST SINGLE CELL A	24 Profession (2) 1 April 10 Profession (2) Profess	4 DURING .
COCKDOWN, ALTERNATIVELY I REQUEST PG HOUSING. AND NOT		
OF HOUSING BOWN GRADE REFUSAL OF JUB ASSIGNMENT OR BY WAS		
OF HOUSING BOWN GREGO, KERUSAL OF SUB ROSINGNIENC OR BY CONT	TOF OBCHANCE K	CFOR /. (3)
	₽,	-
Offender Signature: Walk was her by	Date: 1 EC . 18.	Ca16
Grievance Response:	199	
·		
Signature Authority: CM Wellen AND CMCKELL IN	Dotor 241	
	Date: C 1/2	. /7
Returned because: *Resubmit this form when corrections are made.	Date: 24/	
Returned because: *Resubmit this form when corrections are made.	OFFICE U	
Returned because: *Resubmit this form when corrections are made.  1. Grievable time period has expired.	OFFICE U	USE ONLY CGO Initials:
	OFFICE U Initial Submission Date UGI Recd: Date CGO Recd:	USE ONLY CGO Initials:
1. Grievable time period has expired.	OFFICE U Initial Submission Date UGI Recd: Date CGO Recd: (check one)Screened	USE ONLY CGO Initials:
<ul> <li>☐ 1. Grievable time period has expired.</li> <li>☐ 2. Illegible/Incomprehensible.*</li> <li>☐ 3. Originals not submitted. *</li> </ul>	OFFICE U Initial Submission Date UGI Recd: Date CGO Recd: (check one)Screened Comments:	USE ONLY CGO Initials:
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### Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/17 Texas Department of Crintinal Justice

U U

STEP 1 GRIEVANCE FORM	Grievance #: 201704 2063  Date Received:
Offender Name: MALKER, JAHAINY LEG TDCJ# 1215501  Unit: COFFIEL Housing Assignment: N1-104T  Unit where incident occurred: CO-OOLO	Investigator ID#:

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing. Who did you talk to (name, title)? SAFETY OFFICER, A.C.A OFFICER WARDENS VIA: IGO When? REPEATEDLY What was their response? NO REPLY TO NATE. THIS COMPLAINT What action was taken?

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate

REC. YARNS FIVE (5) HOURS OF UNINOTERRUPTED OFF BY AL ON THE HOUR SIGNED IN THE DAYROOMS

HOY 29 2016

**I-127 Front** (Revised 11-2010)

YOUR SIGNATURE IS REQUIRED ON BACK OF THIS FORM

(OVER)

	7/12 Rage 5 of 31 Rage D# 1	FUR THE
SHFETY AND WELL BEING FOR INMATES, AS ENDERGE SH		Á
	4 ° .	and the second s
I ASK NOT TO BE RETALIATED AGRINST BELAUSE OF THIS	Consider TRU LINE OF M	
DISCIPLIMARY REPORT, HOUSING CHANGE OR JOB REFUSEAL	LA MILES TO THE	
		POST CONTROL PRINCIPAL PRI
4 . * *		
Action Requested to resolve your Complaint.		
TREBUEST SINGLE CELL HOUSING, FIVE HOURS OF UNINTERRUPTED	SUFEP, TOILETS AND THE DAS	Rooms a
OR CELLS DESIGNATED FOR YUCH, RAND OSCILATING FAME IN T	THE DAYROOMS.	
Offender Signature: John May Roy 1 181814 1215581 HOW 23	2016 Date: N. Mr. 12 7 011 (0	
Grievance Response:		
One value response.		
Please present only one issue per grievance.		
racade present only one issue per grievance.		
The Classification Department states that you are appro	opriately housed.	
Signature Authority Pages P Corrects	Data: 12-0	9-16s
Signature Authority: P Longer  If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Invi	Date: 12-1	9-16 1 response.
If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investate the reason for appeal on the Step 2 Form.	Date: 22-9 estigator within 15 days from the date of the Step	<b>9-/6</b> 1 response.
If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigation	estigator within 15 days from the date of the Step	<b>9-/6</b> 1 response.
If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investate the reason for appeal on the Step 2 Form.		
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Appendix F

OFFICE USE ONLY

Grievance Code: 506

JUL 0 2 2015



# **Texas Department of Criminal Justice**

# STEP 2

# **GRIEVANCE FORM**

Unit: CDFFIELD Housing Assignment: X.10.3.T Unit where incident occurred: CDFFIELD	Investigator ID#:Extension Date:
You must attach the completed Step 1 Grievance that has been signed by the accepted. You may not appeal to Step 2 with a Step 1 that has been returned unp	e Warden for your Step 2 appeal to be rocessed.
Give reason for appeal (Be Specific). I am dissatisfied with the response at Step 1 bec	ause
$\lambda = -\infty$ $\mu \to 0$	rocken Richardson Coffield
Secrety Statt are not cultertly replacing the I Daylorm Lundous. Lie have a bod Mossi	alindon Screens on the
The TELOZ Caffield Officials have browled	10 11 c
2) Caffield Security Staff das French "Mid Luin	LOU SOMMENTE OU LOGINE
The state of the s	and a drive of the daily
	p spason and by a
A) Altread the Form Essle : A term officers Fall and Hat Extreme Texas Heat COFFIEID Holded a	follower fans to the
35 Side Hallman 123-24 Hallmays. There are	Fans that sit on "1 Color
	its a cually for pinkt?
If the first of coll Fare 1 10 do not	
tans to provide "COOL AIR" in the Dayroom.	Interreguest 2 Fains to

Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/1	7 Page 7 of 31 PageID #: 14
The Bottom Line	
Catheld need to Put The windows screens on	in Every Daylows and
Mount 2 Fans In Each Daysom Not on the	
day room - You can see on the Unit Camara's and	
half of the Dayroom gets NO OVE Whatsocreek. Tell Ho	e warden to sit in the Dayroom
Offender Signature: NAMARIA PRI VILLE VILL	Date: 110 74,7015
Grievance Response:	
,	
Signature Authority: Comecellan ARD comecellas	Date: 13 Jaby 15
Returned because: *Resubmit this form when corrections are made.	OFFICE USE ONLY Initial Submission CGO Initials:
☐ 1. Grievable time period has expired.	Date UGI Recd:
☐ 2. Illegible/Incomprehensible.*	Date CGO Recd:
☐ 3. Originals not submitted. *	(check one)ScreenedImproperly Submitted
4. Inappropriate/Excessive attachments.*.	Comments:  Date Returned to Offender:
5. Malicious use of vulgar, indecent, or physically threatening language.	2 <sup>nd</sup> Submission CGO Initials:
6. Inappropriate.*	Date UGI Recd:
o. Inappropriate.	Date CGO Recd:
	(check one)ScreenedImproperly Submitted
	Comments:
CGO Staff Signature:	Date Returned to Offender:
	3 <sup>rd</sup> Submission CGO Initials:  Date UGI Recd:
	Date CGO Reed:
	(check one)ScreenedImproperly Submitted
	1
	Comments:

# Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/17 Page 8 of Texas Department of Criminal Justice

1cad Department of Criminal dustice	
STEP 1 GRIEVANCE FORM	Grievance #: 2015157843  Date Received: 6-12-15  Date Due: 7-22-15
Offender Name: \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Grievance Code: Suk  Investigator ID #: >>>o\  Extension Date: JUN 2 2 2015  Date Retd to Offender:

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.
Who did you talk to (name, title)? Main Bolde Bode Captain When? 10/09/15
What was their response? Told to tile a complaint
What action was taken? We cent Conditions & basic lights denied as a human
State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate
I'd like to address this complaint to the COFFIEID Administration; About the
Matter of Basic Human Needs and Rights of this time the COFFIEID
Unit is in Variation of Texas Paismens Eighth Amendment wehich torbids
"Cruel and Unusual Punishment."
DI spoke to Major Adarosa and Loonden Richerson as well as All Shift Sugarvisors about getting the screens put on the Dayrown and Hallway Luindows of B-side Hallwall P.4/P3.
Sugarvisus about outling the screens out on the Dayson and Hallyon
Lundons of B-side Hallmall P.4/P3.
2) I have a eight to somewhat decent Prison Conditions and Basic Human Rights and needs I'm being contined in the Extreme Hot Tempotine of the COFFIEID
and needs tin being confined in the Extreme Hot Temporture of the COFFIEID
Dayroom, I as a Human Being am Protected From Extremo Tempatures under
Dayroom. T as a Human Being am Protected From Extremo Tempotures under the US Constitution Rights.
3) I request a lugent / Reasonable: Response on getting (2) tuo Mounted
Rotating Block forms placed in each Daymon (A.S.A.P) Just like the ones
that have been mainted in the P3/P4 Hallways.
I have "Extreme Tempotive" restriction so as that this complaint be
executed. Jun 12 2015;

Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17	7/17 Page 9 of 31 PageID #: 16
•	
· onage. *	
	COLUMN LIBERT OF THE PROPERTY OF THE COLUMN
Action Requested to resolve your Complaint. The Main the Screens placed back on the Dayrism	e il in A i has
3) Plant C = and the same of the sayour	7 Hallway Windows And have
2) Black Forg pounted over the Tis in each Daymon.	nest:
Offender Signature: Johnson, La Links 1215501 122	1138 Date: Sunt 10, 2015
Grievance Response:	
Security Staff state the window screens are currently be	eing replaced. They state there are
fans directed from the Dayrooms and that offenders are p	provided cold water as needed.
Mucha de	il need to be to
Signature Authority:	10/07/d50N Date: 6/14/15
If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Inve State the reason for appeal on the Step 2 Form.	estigator within 15 days from the date of the Step 1 response.
Returned because: *Resubmit this form when the corrections are made.	
1. Grievable time period has expired.	
2. Submission in excess of 1 every 7 days. *	OFFICE USE ONLY
3. Originals not submitted. *	Initial Submission UGI Initials:
4. Inappropriate/Excessive attachments. *	- Grievance #:
5. No documented attempt at informal resolution. *	Screening Criteria Used:
6. No requested relief is stated. *	Date Recd from Offender:
7. Malicious use of vulgar, indecent, or physically threatening language.	Date Returned to Offender:
3. The issue presented is not grievable.	2 <sup>nd</sup> Submission UGI Initials:
	Grievance #:
9. Redundant, Refer to grievance #	Screening Criteria Used:
10. Illegible/Incomprehensible. *	Date Recd from Offender:
11. Inappropriate. *	Date Returned to Offender:
UGI Printed Name/Signature:	3 <sup>rd</sup> Submission UGI Initials:
Application of the screening criteria for this grievance is not expected to adversely	Grievance #:
Affect the offender's health.	Screening Criteria Used:
Madical Signature Authority	Date Recd from Offender:
Medical Signature Authority:	Date Returned to Offender:



### **Texas Department of Criminal Justice**

# STEP 2

### OFFENDER GRIEVANCE FORM

Offender Name	Schnny Lee	_TDCJ#\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Unit: OO6. CO.	Housing Assignmen	1:42.108 Fm2W
Unit where incident occurred:	V. DO.	ad
Unit where incident occurred:	<u>Calle</u>	ad

OFFICE USE ONLY
Grievance #: 2016149396
UGI Recd Date: JUN 09 2016
HQ Recd Date: JUN 1 6 2016
Date Due:
Grievance Code: 500
Investigator ID#:
Extension Date:

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.

Give reason for appeal (Be Specific). I am dissatisfied with the response at Step 1 because
Give reason for appeal (Be Specific). I am dissatisfied with the response at Step 1 because  The appealing the decision of the Stop beganset 2010149396
because the hinders response was a cover-up to heep toon
addressing the real issue. Install tailets in all dayrooms as they used to
he hat only does the H.H. Coffield unit house on T.C.I motal Fabrecation Plant but a
Maintaince Department as well that can install such toilet. And to address the
whorders response the collied unit does not advan to the proper palicy of the
Ingress and Egress, leaving me in the dayroom for hours. To investigate such dain
you can resize the carreras on the Colfield Unit on any over Day, week as Month.
And failed you have a lay-in or had to go to the pill window, and missed the
Ingress and Egress cause you're stuck without bring access to a toilet. And
regardless of the Calfield unit was constructed in the Wis. In Ruiz is Estelle
503 F. Supp 1265 (1980) HN 51 Shows the policy of the state, that the prison system
shall be managed and operated in a manner consistent with the operation of a modern
prison system and that all immates shall receive humane treatment, is set out in
TEX Rev. Civ. Stat. Ann & Colloba (1976) hely do all other units have tailets best the
Caffield Unit? Mely am & subjected to be treated like a Slave?
To resolve said problem View Stepl Action Requested Your assistance in this
matter can hab the Coffield unit be can consistent with the caration of a
modern o'son system. This is the 21st. Continuy.

Case 6.17-cv-00166-RC-JDL Document 1-1 Filed 03/17	717 Page II of 31 Page ID #. 18
	· · · · · · · · · · · · · · · · · · ·
Offender Signature: Leanne de Miller (1550)	Date: June 7,2016
Grievance Response:	
There is no indication of an ACA violation regarding the dayroom set up	. Urinals/sinks are provided in each dayroo
and you have access to your cell during the hourly ingress process. No corr	rective action warranted.
a controlle and controlle	D 12 1/ 1/
Signature Authority: CMCKeller ARD CMCKell gr	Date: 12 July 16
Returned because: *Resubmit this form when corrections are made.	OFFICE USE ONLY
	Initial Submission CGO Initials:
☐ 1. Grievable time period has expired.	Date UGI Recd:
☐ 2. Illegible/Incomprehensible.*	Date CGO Recd:  (check one)ScreenedImproperly Submitted
☐ 3. Originals not submitted. *	Comments:
☐ 4. Inappropriate/Excessive attachments.*	Date Returned to Offender:
☐ 5. Malicious use of vulgar, indecent, or physically threatening language.	2 <sup>nd</sup> Submission CGO Initials:
☐ 6. Inappropriate.*	Date UGI Recd:
• • •	Date CGO Recd:
	(check one)ScreenedImproperly Submitted
	Comments:
CGO Staff Signature:	Date Returned to Offender:
	Date UGI Recd:
	Date CGO Recd:
	(check one)ScreenedImproperly Submitted
	Comments:

Date Returned to Offender: \_

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Texas Department of Criminal Justice



### **OFFENDER** STEP 1 GRIEVANCE FORM

u-	-108	
Offender Name AMAREL Z	15/ unada	TDCJ# <u>1215501</u>
Unit: 006 60.	Housing Assignment:	VIISK
Unit where incident occurred:	V VD * 1	Trif.
·		
	SECTION OF THE SECTION OF THE CONTRACT OF THE SECTION OF THE SECTI	

Page 12 of 31 PageID #: 19
OFFICE USE ONLY
Grievance #: <u>2016 149396</u>
Date Received: 5.26,16
Date Due: 7,5,16
Grievance Code: 506
Investigator ID#: キンパ
Extension Date:
Date Retd to Offender: JUN 02 2016

appealing the results of a disciplinary hearing.  Who did you talk to (name, title)? Via I a what der late Via I be A CA MES Hamel When? May 23-24, Late
What was their response? <u>Name</u>
What action was taken? This complaint.
State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate
by several Africals while stuck in the developmentar hours at a time.
Dening me access to a tallet on the ability to go to my cell when I
need to defeate "Courses une one to three problems (1) I deprode Muse
and defends on muself. @ I decide inself and defends on the surrupte
(3) Hald my deferation inside my bours, which courses me pain and
disconfect. Here a fact: The Coffield unit is one of the Only writes that
durit and won't assuide toilets in the daysoums when and for trimites
that get stuck in the dayscams for the use too defection.
The interned Head Warden I Cates and Mrs. Homel the A.C.A
director on the Coffield Unit but have received no response in 26.200

Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/	17 Page 13 of 31 PageID #: 20
	The state of the s
	) (A.
Action Requested to resolve your Complaint.	while and will proposed the day
are have tailets installed in all daysooms in the building or	
Offender Signature: Jak many he Walker 125501 W. 1	Date: 1/104 710, 7010
Grievance Response:	
Security Staff state that the Coffield Unit	h. 1
Security Staff state that the Coffield Unit was construc Units that have toilets in the Dayrooms. They state hour	ted in the 1960's prior to ly Ingress and Egrass is
conducted to provide ample opportunity for offenders to	return to their cells to
use the toilet.	
P' I	
Signature Authority:	SON Date: 6-/-/0
If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investa State the reason for appeal on the Step 2 Form.	estigator within 15 days from the date of the Step 1 response.
Returned because: *Resubmit this form when the corrections are made.	
☐ 1. Grievable time period has expired.	
2. Submission in excess of 1 every 7 days. *	OFFICE USE ONLY
3. Originals not submitted. *	Initial Submission UGI Initials:
4. Inappropriate/Excessive attachments. *	Grievance #:
5. No documented attempt at informal resolution. *	Screening Criteria Used:
6. No requested relief is stated. *	Date Recd from Offender:
7. Malicious use of vulgar, indecent, or physically threatening language. *	Date Returned to Offender:
8. The issue presented is not grievable.	2 <sup>nd</sup> Submission UGI Initials:
9. Redundant, Refer to grievance #	Grievance #:Screening Criteria Used:
10. Illegible/Incomprehensible. *	
11. Inappropriate. *	Date Recd from Offender:
UGI Printed Name/Signature:	Date Returned to Offender:  3 <sup>rd</sup> Submission   UGI Initials:
Ox Filmed Hame/Dignature.	3 <sup>rd</sup> Submission UGI Initials: Grievance #:
Application of the screening criteria for this grievance is not expected to adversely	Screening Criteria Used:
Affect the offender's health.	Date Recd from Offender:
Medical Signature Authority:	Date Returned to Offender:

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# **Texas Department of Criminal Justice**

# STEP 2

### OFFENDER GRIEVANCE FORM

	<u> </u>	- 1221 ( 022 2 0 241.2
Offender Name: Maken	Show Lee	TDCJ#\7\550\
Unit: <u>66 Co.</u>	Housing Assignment:	( The 1087
Unit where incident occurred:	Cattield	1204
You must attach the comm	lated Stan I Griangnes th	at has been signed by the Wa

<b>OFFICE</b>	USE	<b>ONLY</b>
---------------	-----	-------------

Grievance #: 2016152210

UGI Recd Date: JUN 07 2016

HQ Recd Date: <u>JUN 1 3 2016</u>

Date Due:

Grievance Code: 50 6

Investigator ID#:

**Extension Date:** 

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.

Give reason for appeal (Be Specific). I am dissatisfied with the response at Step 1 because
In Appealing the response of the Step 1 # 2016152210 bocause the
Literator refused to connectly resolve the situation.
With only is the Cattield Administration discording me as a
human being 60 % is the American Concertional Association Committee
(A.C.A) as & continue to in unsafe conditions as I need not usait for
a tragic event to happen before action is taken. Luhat makes the Mader
prison and Alendon more special than I hely must I subject myself
to a tragic event entering and exiting my bunk, when can't Said paddem
he resolved as stated in the Step 1. I shouldn't have to spend 10000
modical Co power to have modical one me restrictions to assign me
a bottom brink due to my knee & feet going had tring to enter and exit
the top bunk as busting my hoad talling trum to do so. The Step !
answers the problem to this situation.
·

Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/17	Page 15 of 31 P	ageID #: 22
		G - Maria
		Y
	· .	***
Offender Signature: Lan many Lox   Mark #121550)	Date: Line	la Zalla
Grievance Response:		
Giltvance Response.		
An review has been conducted on the Step I grievance and you were appropriate warranted.	ely advised at the Unit	level. No further action is
wananca.		
,		
Signature Authority: College ARD Come Kellon	Date: <u>30</u> )	<u> </u>
Determined by December of this forms where connections are made	OFFICE	LICE ONLV
Returned because: *Resubmit this form when corrections are made.	Initial Submission	USE ONLY CGO Initials:
☐ 1. Grievable time period has expired.		
☐ 2. Illegible/Incomprehensible.*		
☐ 3. Originals not submitted. *		Improperly Submitted
4. Inappropriate/Excessive attachments.*		
5. Malicious use of vulgar, indecent, or physically threatening language.		CGO Initials:
☐ 6. Inappropriate.*	_	
o. mappropriate.	Date CGO Recd:	
	"	Improperly Submitted
CGO Staff Signature:	Date Returned to Offender: 3rd Submission	CGO Initials:
		CGO midais.
	ì	Improperly Submitted
	Comments:	

Date Returned to Offender:

### Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/17

E OF

**Texas Department of Criminal Justice** 

# STEP 1

### OFFENDER GRIEVANCE FORM

U-108

_ · · · · · · · · · · · · · · · · · · ·	-108	
Offender Name: Walkes.	Shring Lee TDCJ# 125501	
, ,	Housing Assignment: X 1777	
Unit where incident occurred:	(\_\3\00\)	

Page 16 of 31 PageID #: 23
OFFICE USE ONLY
Grievance #: 20/6/52210
Date Received: 6-/-/6
Date Due:
Grievance Code: 506
Investigator ID #: ## ## ###
Extension Date:
Date Retd to Offender, JUN 02 2016

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.
Who did you talk to (name, title)? MYS. Haveel A.C.A. Via T.60  When? When?
What was their response? None
What action was taken? This Compleint
State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate
Rocedure) to invotes to enter and/or exit the top brink Arm attempt to enter
and or exit the too bunk is an unsafe not too the only aid is the toilet,
wet sink dose handle on the lower bunk which put me in a
substantical Risk of serious horn; Because human beings are
noturally predisposed to laccome contractional ruben torced to timetra
under madequate him space.
The 8th Eighth Amendment imposes attramative duties upon
T.D.C.I Officials to take Resemble measures to maintain a sate living
envisonment for inmotes under their care see From V. Brennan 509 U.S.
ct 832, 114 S. Ct. 1470). Mare importantly it is cluel and unusal
purishment to hald prisoners under an unsate Condition and remedy too
the weste condition need not await a trapic event. See
Helling V. McKinney 509 US. 25,33,113 8.Ct 2475 LEd 2d 22 (1993) and
Barney V. Pulsipher 143, F.3d 1299, 1311 (16th Cir. 1998) Furthermore Prison
Official's cannot ignore a problèm once it has been brought to their
Attention And the Policy of the state says that the Prism System shall be
managed and approted in a manner consistent with the operation of a modern
Person System and that all immates shall receive human treatment set out in
Tex. Rev. Civ. Stat. Ann. \$ 6166 a (1976)
Take note the H.H. Caffield Lint not only has a Maintainere Department that
could install step ladder for the safe use in extering and/or exiting this top brunk
but it also houses a T.C.I Metal Fabercation Plant that can do the same.

Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/1	17 Page 17 of 31 PageID #: 24 5
	no bunks for my softety & health
or immediately weld step ladders and Top and	battan bunks
JUN D 1 2016	
·	
Action Requested to resolve your Complaint.  B loe Vicused in 15/16 Disms or shipped to a modern prison that have step	boddees on the bunks for my sofely & hoot
Or immediately field step ladders on to top & bottom bunks	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
are a contract of the state of	7 1 2 1
300 11 7 319	Date: Line L. Lallo
Grievance Response:	
There is no American Correctional Association Standard th	eat requires the Coffield
Unit to place step ladders on the bunks. You do not have	any medical restrictions
that include assignment to a bottom bunk. If you feel you	need these restrictions,
contact the Unit Medical Department.	
g ч	
	,
Signature Authority:	and solv Date. Date.
If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Inv State the reason for appeal on the Step 2 Form.	estigator within 15 days from the date of the Step 1 response.
Returned because: *Resubmit this form when the corrections are made.	
1. Grievable time period has expired.	
2. Submission in excess of 1 every 7 days. *	OFFICE USE ONLY
3. Originals not submitted. *	Initial Submission UGI Initials:
4. Inappropriate/Excessive attachments. *	Grievance #:
5. No documented attempt at informal resolution. *	Screening Criteria Used:
6. No requested relief is stated. *	Date Recd from Offender:
7. Malicious use of vulgar, indecent, or physically threatening language. *	Date Returned to Offender:
8. The issue presented is not grievable.	2 <sup>nd</sup> Submission UGI Initials:
	Grievance #:
9. Redundant, Refer to grievance #	Screening Criteria Used:
10. Illegible/Incomprehensible. *	Date Recd from Offender:
11. Inappropriate. *	Date Returned to Offender:
UGI Printed Name/Signature:	3rd Submission UGI Initials:
Application of the screening criteria for this grievance is not expected to adversely	Grievance #:
Affect the offender's health.	Screening Criteria Used:
	Date Recd from Offender:
Medical Signature Authority:	Date Returned to Offender

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Texas Department of Criminal Justice



STEP 1	OFFENDER GRIEVANCE FORM	Grievance #: <u>2017073268</u> Date Received: <u>1/17/17</u> Date Due: <u>2/26/17</u>
***		Grievance Code: 503
Offender Name's NAIKER, JOHNS	Y LEE TDCJ# <u>\2\550\</u>	Investigator ID #:
Jnit: COO CO. Housing A	ssignment: W1-2-22	Extension Date:
Init where incident occurred:	FILE	Date Retd to Offender: <u>JAN 2 4 2017</u>

OFFICE USE ONLY

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.  Who did you talk to (name, title)? Sat. Avery, Sat. Polk. Sat. T. Blink & G. Meknight via 760 When? REPERTENCY
What was their response? Linked AT CRAZY
What action was taken? NUNE (THIS CAMPIAINT)
State your grievanctin the space provided. Please state who, what, when, where and the disciplinary case number if appropriate  THIS COMPLANT IS AGAINST THE COMPLIANCE AND SAFETY OFFICIALS: Sot. T. BLINK AND
G. MEKNIGHT FALING LITH THE SANITATION PROBLEMS ON THE CONFELIED UNIT (BUILDING)
THE SPREAD OF MISEASE IS INCREMSED AS THE DAYROOM WINDOWS. FLODRS, BENCHES, AND
SINKS AND LIRINALS ARE NOT CLEANED AND SIGNETIZED FOR MONTHS AT A TIME IF EVER.
THERE ARE PISS STAINS IN THE LIPINALS BUT THE SAFE AND COMPLIANCE OFFICIALS DAN'T
KNIND THIS BECAUSE THEY REFUSE TO WALK AROUND THE UNIT TO SEE THAT THINGS ARE SAFE
AWA IN COMPLIANCE, MOIN HAS STARTED TO GROW IN THE LINDOW SEALS AND BARS. AND WHEN
ASK FOR EQUIPMENT AND SUPPLY TO CLEAN THE DAYROOM (S) MYSELF I'M DENIED. I EVEN WENT AS
FAR AS TO SEEK A JOB SUST CIFANING THE WINDOWS FAIS, THIS SANITATION ISSUE IS EXTREMELY
LAWHEALTHY AND HAS THE POTENTIAL TO CAUSE HARM, CEBISLATURE DESIRES THAT THE TEXAS DEPARTMEN
OF CORRECTIONS FOLIOW STATE HEALTH AND SHFIFTY STANDARDS. THE POLICY OF THE STATE, THAT THE
PRISON SYSTEM SHALL BE MANAGED AND OPERATED IN A MANNER CONSISTANT WITH THE OPERATION OF A
MODERN PRISON SYSTEM AND THAT ALL INMATES SHALL RELEIVE HUMANE PREATMENT! IS SET OUT IN
TEX. REV. CIV. STAT. ANN. \$ 6166 a (1976) PROVIDES THAT THE DIRECTOR OF THE DEPARTMENT OF
CORRECTIONS IS RESPONSIBLE FOR THE PROPER SANITATION, CARE TREATMENT, FRENING CLOTHING
AND MANIAGEMENT OF THE INMATES.
TO RESOIVE THIS COMPLAINT - CORLL'S BE HOUSED IN A CIFANGE ENVIRONMENT LIKE PLOOR PE
AND T ASK NOT TO BERETALIATED ABBINST OR HARASSED FOR FILING THIS COMPLETENT, IN THE
FORM OF A DISCIPLINARY REPORT, BEING REFUSED A BUB OPPORTUNITY OR A HOUSING CHANGE
THAT IS LOOKED AT AS WORSE THEN WHERE THE HOUSES NOW.
JAN 17 2017 JAN 18 2017

Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/	17 Page 19 0f 31 PageID #: 26
2	*
A Company of the Comp	
Action Requested to resolve your Complaint.	
TO BE HOUSED IN A CLEANER ENVIRONMENT LIKE PG AND	PS WHERE THE DRY ROSMS AND
RESTROOM ARE CHEAN AND SAMPTIZES EVERY DAY. JAN GALLE	2017
Offender Signature: Hanny Loo Linker 121550 1999	9 2011 Date: DEC. 31, 2016
Grievance Response: \\\\	
	era.
Security Staff state the dayrooms are cleaned througho	ut the day. No further action
is warranted.	
**************************************	
Signature Authority: \( \( \lambda \) \( \lambda \)	[vo] Poste: 1-24-17
If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Inv State the reason for appeal on the Step 2 Form.	restigator within 15 days from the date of the Step 1 response.
Returned because: *Resubmit this form when the corrections are made.	
1. Grievable time period has expired.	
■ 1. Ghevaore time period has expired.  ■ 2. Submission in excess of 1 every 7 days. *	OFFICE USE ONLY
3. Originals not submitted. *	Initial Submission UGI Initials: 1) W
4. Inappropriate/Excessive attachments. *	Grievance #: 20170 6557/ Screening Criteria Used: # 3
5. No documented attempt at informal resolution. *	
6. No requested relief is stated. *	1/2/
7. Malicious use of vulgar, indecent, or physically threatening language. *	1
8. The issue presented is not grievable.	2 <sup>nd</sup> Submission UGI Initials: でい Grievance #: ユットロ (よ) らう
9. Redundant, Refer to grievance #	Screening Criteria Used:
10. Illegible/Incomprehensible. *	Date Recd from Offender:
11. Inappropriate. *	Date Returned to Offender: 1-1017
UGI Printed Name/Signature: N-White William	3rd Submission UGI Initials:
	Grievance #:
Application of the screening criteria for this grievance is not expected to adversely	Screening Criteria Used:
Affect the offender's health.	Date Recd from Offender:
Medical Signature Authority:	Date Returned to Offender:

# Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/17 Texas Department of Criminal Justice



# STEP 1

### OFFENDER GRIEVANCE FORM

	Page 20 of 31 Page P#N 27
	Grievance #: 2017058519
	Date Received: 12-19-16
	Date Due: 1-28-17
	Grievance Code: 510
	Investigator ID #:
/	Extension Date:
	Extension Date:

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.  Who did you talk to (name, title)? VIN DIO 6. MEKNIGHT & A.C.A. M5 HAMEL  When? REPERTED CT
What was their response?
What action was taken? THIS Complaint
State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate
MY COMPLAINT IS AGAINST THE SAFETY RIVES, REGULATIONS AND
POLICY OFFICER C. MCKNICHT; FOR HAVING TOTAL DISPEGERN AND REFUSING
TO POST THE MAX TOTAL AMOUNT OF INMATES THAT SHOULD BE IN THE
SHOWER AT ONCE AS THERE IS FOR THE GYM AND DAYROLMS, AND AISO
REFUSING TO POST UP A SHOWER SCHEDULE FOR WHEN THE SHOWERS SHOULD BE
OPEN TO RILLING SHOWERS.
SHOWERS ARE "CONSTANTIY OVERGROWED" CREATING A SAFETY AND HEALTH
HATZARD BY PLACING MORE THAN 100-PRISONERS IN THE SHOWER WITH ONLY 60
SHOWER HEADS SEE RHODES V. CHAPMAN 1015. CT. 2392
THIS VIOLATES PD-22 # 22(b) RECKLESS ENDANGERMENT AS WELL AS
PD 22 # 23: MISTREATMENT OF OFFENDER PLACING ME IN AN ENVIRONMENT TWHICH
CHIL BECOME THREATENING AND DHUBEROUS LITTH ITS OVERCROLLEDING.
I NEED NOT WAIT LATELY AM ACTULLY ASSAULTED TO OBTAIN RELIEF SEE-
TEX. PENAL COBE ANN \$39.021 (1980)
IT IS A VIOLATION OF THE CONSTITUTION TO ALLOW AN IMMATE TO BE HURT AFTER
THE ADMISTRATION HAS BEEN INFORMED.
Alternatively T REQUEST PG. Housing
I ASK NOT TO BE RETALIATED AGAINST FOR MAKING THIS COMPLAINT BY WAY OF A HOUSING
DOWNE GRANE, REFUSAL OF JOB ASSIGNMENT, OR BY WAY OF DISCIPLIARY REPORT: DEC 19 705

Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17	7/17 Page 21 of 31 PageID #: 28
,-	
4	
Action Requested to resolve your Complaint. To Past MAX TOTAL AMOUNT OF IMMATES THAT SHOULD BE ALLOWED	5 IN THE SHOWER AT ONICE. AND POST UP.
HOWER SCHEDULE FOR WHEN SHOWERS ARE OPEN FOR SHOWERS.	
Offender Signature: Johnney Lee Wolker 1215501 19 2	010 Data N. C. 19 2 31/2
Grievance Response:	iller Date. IZEC. [1] COID
Grievance Response:	
The Risk Management Office states that a shower capacitation	ity sign is not required
by American Correctional Association Standards. No fu	rther action is warranted.
· ·	
•	
<b>^ 1</b>	
()	
Signature Authority: Page 1. Nop-	er Date: 1-20-17
f you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Inve	estigator within 15 days from the date of the Step 1 response.
State the reason for appeal on the Step 2 Form.  Returned because: *Resubmit this form when the corrections are made.	
Grievable time period has expired.	OFFICE HOT OWNER
2. Submission in excess of 1 every 7 days. *	OFFICE USE ONLY Initial Submission UGI Initials:
3. Originals not submitted. *	Grievance #:
4. Inappropriate/Excessive attachments. *	Screening Criteria Used:
5. No documented attempt at informal resolution. *	Date Recd from Offender:
6. No requested relief is stated. *	Date Returned to Offender:
7. Malicious use of vulgar, indecent, or physically threatening language. *	2 <sup>nd</sup> Submission UG1 Initials:
8. The issue presented is not grievable.	Grievance #:
9. Redundant, Refer to grievance #	Screening Criteria Used:
10. Illegible/Incomprehensible. *	Date Recd from Offender:
11. Inappropriate. *	Date Returned to Offender:
UGI Printed Name/Signature:	3rd Submission UGI Initials:
	Grievance #:
Application of the screening criteria for this grievance is not expected to adversely Affect the offender's health.	Screening Criteria Used:
	Date Recd from Offender:
Medical Signature Authority:	



# TEXAS DEPARTMENT OF CRIMINAL JUSTICE OFFICE OF THE INSPECTOR GENERAL

Bruce W. Toney Inspector General

John C. West General Counsel

January 26, 2017

Johnny Walker, TDCJ #1215501 Coffield Unit 2661 FM 2054 Tennessee Colony, Texas 75884

RE: Notice of Intent to Sue

Dear Offender Walker:

Tis office received your Notice of Intent to Sue containing the signatures of 15 offenders at the Coffield Unit. The letter was addressed to General Counsel Bruce Toney and was therefore forwarded to my office. Please be advised that Bruce Toney is the Inspector General, Office of the Inspector General (OIG) for Texas Department of Criminal Justice (TDCJ).

I have reviewed the notice and do not find any complaints that are directed at OIG, therefore your notice has been forwarded to Sharon Howell, General Counsel for TDCJ.

Since lely,

John C. West General Counsel



### Texas Department of Criminal Justice

Bryan Collier Executive Director

February 6, 2017

Johnny L. Walker TDCJ # 01215501 2661 FM 2054 Tennessee Colony, TX 75884

Re: Johnny L. Walker TDCJ #01215501 v. TDCJ

Date of Incident: January 6, 2017

Dear Mr. Walker:

Please accept this letter as acknowledgment of receipt for your correspondence received by this office on January 30, 2017. Acknowledgment of your correspondence constitutes no admission of liability. We will contact you if additional information is needed or as soon as a determination has been made as to whether your claim should be paid.

Sincerely,

Office of the General Counsel

Texas Department of Criminal Justice

Our mission is to provide public safety, promote positive change in offender behavior, reintegrate offenders into society, and assist victims of crime.

Office of the General Counsel Sharon Felfe Howell, General Counsel – sharon.howell@tdcj.texas.gov

P.O. Box 13084 Capitol Station Austin, Texas 78711-3084 Phone (512) 463-9899, FAX (512) 936-2159 P.O. Box 4004

Huntsville, Texas 77342-4004

**OFFICE USE ONLY** 

Grievance #: 20

UGI Recd Date: \_

HQ Recd Date:



Give reason for appeal (Be Specific).

### **Texas Department of Criminal Justice**

# STEP 2

### OFFENDER GRIEVANCE FORM

	GRIEVANCE FORM	Date Due:
Offender Name: Howard	White TDCJ# 1176590	Grievance Code: 506
Unit: <u>Co</u>	Housing Assignment: 73-319 6448	Investigator ID#:
Unit where incident occurred:		Extension Date:

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.

I am dissatisfied with the response at Step 1 because...

Se-level of burning and thosping to Your SIGNATURE IS REQUERED ON BACK OF THIS FORM I-128 Front (Revised 11-2010) (OVER)

,	•
Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17	/17 Page 25 of 31 PageID #: 32
These facts Violate the Eighth Amendment -	
564 F. 20 388,393 The ACA and all other Corn	rectional Standards have
stated that housing two Domer in 40 square fact hours per day of Ferds the Contemporary sta	cell for 40) twenty or mare
mous ju day or viss in convenience in sta	andard of heeren decerces.
Offender Signature: 7000 Why	Date: Aug. 8, 2015
Grievance Response:	
An investigation of your Step I grievance was conducted and you were appropri warranted.	iately advised at the Unit level. No further action is
Signature Authority: CMKellan APA CMCKELLAN	Date: 1 5ep 7 15
Returned because: *Resubmit this form when corrections are made.	OFFICE USE ONLY
☐ 1. Grievable time period has expired.	Initial Submission CGO Initials:
☐ 2. Illegible/Incomprehensible.*	Date UGI Recd:
☐ 3. Originals not submitted. *	(check one) Screened Improperly Submitted
	Comments:
4. Inappropriate/Excessive attachments.*	Date Returned to Offender:
5. Malicious use of vulgar, indecent, or physically threatening language.	2 <sup>nd</sup> Submission CGO Initials:
6. Inappropriate.*	Date UGI Recd:
	(check one)ScreenedImproperly Submitted
	Comments:
CGO Staff Signature:	Date Returned to Offender:
	3rd Submission CGO Initials:
	Date UGI Recd:

(check one) \_\_\_\_Screened \_\_\_\_Improperly Submitted

Date CGO Recd:\_

Comments: \_\_\_\_

Date Returned to Offender:

### Te

TEO	Texas Department of Criminal Justice	OFFICE USE ONLY
	STEP 1 OFFENDER GRIEVANCE FORM	Grievance #: 201518 4345  Date Received: 7.27.15
	SIEPI GRIEVANCE FORM	Date Due: 9-5.15  Grievance Code: 504
Offender Name:	HOWAS LONGE TDCJ.# 1776590	Investigator ID #:
Unit:	2000	Extension Date:
Unit where incide	ent occurred: <u>COMIA</u>	Date Retd to Offender: JUL 3 1 2015

Unit where incident occurred: Cottield Bar Date Retd to Giftender: JUL 3 1 2015  TCC - Townsin - Living Condition - 506 B317  Date Retd to Giftender: JUL 3 1 2015
You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when 7/4 appealing the results of a disciplinary hearing.  Who did you talk to (name, title)?  What was their response?  What section was taken?  What section was taken?
State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate
This is an official complaint filed presumed to Trumb Gricipace Code # 506 Inhumain - Living Constition filed organist the compliance officer, and ACA Officer due to their returns to take corrective - action they reture to Even action the issue of be locked in these cells to 24-boxes a day to weeks at a time.
I am housed in a cell with another prisoner yet the cell measure to so. The state says this is too small far - 2 dogs. All housing standards soup its too small tou A-mon. This particularly so here on Med-Custody where mader mixed possibilities I am in this cell with another for a mini, of QD twenty hours
per day. Then on lockdown that accures every (90) hinty days I am toxish to endure this condition 24-his, a day for weeks at a time. I must smell his gas and he smells mine. The serious horn that is caused by the confinement of two person in such madequate space has been documented in study after study an exceptioners?
IAND-SEE ALLIZ V. ESTELLE 503 F. 3Up. DUS; Tillery V. Durns, 907 F. Supp. 418-holding labore paisoners sealing long sentences double-celling on overly single-celling in a thirty-nine (39) sq. ft. cell lucs inconstitutional. The cell space is not even
adequiste enough to this people to proble acourt simultaneously there is his sitting spere or table to withing. The human-being is Naturally predisposed to become confrontational when forced to twiction when incorporate hims space - See former or beauty of the confrontational when the confrontational when the confrontational when the confrontational when the confrontational whose of the confrontational when the confrontational whole of the confron

Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/	/17 Page 27 of 31 PageID #: 34
Zr.,	The second secon
	·
	·
× <sup>50</sup>	
2 .	
Action Requested to resolve your Complaint.	
	If these bunks temped from
my cellion that I be single-celled.	
Offender Signature: White	Date: July 17 2015
Grievance Response:	,
space per occupant as required in the 1986 Michael stynon mandatory ACA standard and has been mitigated due cubicles/cells daily. They are allowed to exit for such indoor/outdoor recreation.  Signature Authority:  If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investate the reason for appeal on the Step 2 Form.	to allowing offenders to exit their activities as showers, and hardson Date: 7/30//5
Returned because: *Resubmit this form when the corrections are made.	
1. Grievable time period has expired.	
2. Submission in excess of 1 every 7 days. *	OFFICE USE ONLY
3. Originals not submitted. *	Initial Submission UGI Initials:
☐ 4. Inappropriate/Excessive attachments. *	Grievance #:
5. No documented attempt at informal resolution. *	Scicening Criteria Used:
6. No requested relief is stated. *	Date Recd from Offender:
7. Malicious use of vulgar, indecent, or physically threatening language. *	Date Returned to Offender:
8. The issue presented is not grievable.	2nd Submission UGI Initials:
9. Redundant, Refer to grievance #	Grievance #:
10. Illegible/Incomprehensible. *	Screening Criteria Used:
11. Inappropriate. *	Date Read from Offender:
UGI Printed Name/Signature:	Date Returned to Offender:  3rd Submission LIGI Initials:
o of Frince Chambioligitature.	3 <sup>rd</sup> Submission UGI Initials: Grievance #:
Application of the screening criteria for this grievance is not expected to adversely	Screening Criteria Used:
Affect the offender's health.	Date Recd from Offender:
Medical Signature Authority:	Date Returned to Offender:



### **Texas Department of Criminal Justice**

STEP 2

OFFENDER

OFFICE USE ONLY

Grievance # 20/4/92099

UGI Recd Date: AUG

***	OLI LI (DEL	HO Recd Date: AUU 1 3 ZUIU
	GRIEVANCE FORM	Date Due: 9-34
Offender Name: Howard White	TDCJ#_1776590	Grievance Code: 506
Unit: <u>CO.</u> Housing A	Assignment: A-HST AW&B	Investigator ID#:
Unit where incident occurred:	7-006	Extension Date:

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.

Give reason for appear (be specific). Lam dissatisfied with the response at step 1 because
This is an appeal from Step-1 Grievance #2016192099 or well
This is an appeal from Step-I Grievavce #20/6/92099 or well as NOTICE OF MY INTENT TO SEEK COMPENSATION for each day
That I remain housed in this manner, because the worden is either incompentant or
he is deliberately trying to mislead me into thinking that I am housed in a
Humane Manner He atteges that ACA-Standard is Now-mandatory due to
mitigating circumstance, however, those mitigating circumstances do NoT exist
here and Made cestary Plus they are when Madexistant for the entire united
lockdowns. I just completed (3) Thirty-seven consecutive days of confinement
in this cell mensuring 4554 ft. or less with another, 24-hours per day likether
ACK- Standards are waived in irrelevant; the U.S. Constitution forbids Cruel
and Unusal Purishment Bottom-line, my confinement in this cell with another
For days and weeks at a time for 24-hours per day, with temperatures
as high as 120° constitutes the Intentional Infliction of Emotional Distress,
which arounts to Couldand Ususal Punishment. The BATILE Court examined
applicable design standards and case law all of which imposed minima
For cell space of sixty square feet or greater per inmate see BATTLEV.
ANDERSON, 564 F. 24 388,345 The ACA and all other Correctional Standa
ands have stated that housing two(2) men in (40) Forty square foot cell
For 60) twenty or more hours per day offeres Contemporary Standards
of Human Decercit

Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/	17 Page 29 of 31 PageID #: 36
Offender Signature: Noward White	Date: Aug. 13, 2016
Grievance Response:	
The state of the s	
A review has been conducted on your Step I grievance and you were appropriate should be noted that Lockdown status is temporary and offenders are not collockdown. No further action is warranted.	ely advised at the Unit level regarding cell space on fined to their cells throughout the duration of
Signature Authority: CMCKell ABS CMCKelln	Date: 95-pt 16
Returned because: *Resubmit this form when corrections are made.	OFFICE USE ONLY Initial Submission CGO Initials:
☐ 1. Grievable time period has expired.	Date LIGI Reed:
☐ 2. Illegible/Incomprehensible.*	Date CGO Recd:
☐ 3. Originals not submitted. *	(check one)ScreenedImproperly Submitted
4. Inappropriate/Excessive attachments.*	Comments: Date Returned to Offender:
5. Malicious use of vulgar, indecent, or physically threatening language.	2nd Submission CGO Initials:
☐ 6. Inappropriate.*	Date UGI Recd:
	Date CGO Recd:
	(check one)ScreenedImproperly Submitted
	Comments:
CGO Staff Signature:	Date Returned to Offender:  3rd Submission CGO Initials:
	Date UGI Recd:
	Date CGO,Recd:
	(check one) Screened Improperly Submitted
	Comments:

# Case 6:17-cv-00166-RC-JDL Document 1-1 Filed 03/17/17 Texas Department of Criminal Justice

Page 30 of 31 PageID #: 37 OFFICE USE ONLY	RECORD
Grievance #: 2016192099	
Date Received: 8/8/16	
Date Due: 9/17/16	
Grievance Code: 500	***
Investigator ID #:	
Extension Date:	
Date Retd to Offender: AUG 10 2016	

GRIEVANCE FURIVI	Date Due: 9/17/16	
***	Grievance Code: 500	
Offender Name: Hugh White TDCJ # 177687	Investigator ID #:	
Unit: Housing Assignment:	Extension Date:	
Unit where incident occurred:	Date Retd to Offender: AUG 1 0 2016	
IGG # SUG Living Consditions # 200 Housing		
You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.  Who did you talk to (name, title)? ViA - I CO CLASSIFICATION: Scattery When?  What was their response? No - Rody  What action was taken? No - I was Min Continued to a since I was cell by Another Instead		
State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate		
This is an official complaint Filed presument to invente generalize consist 506-		
Majoring 45-gett. at 1250) with another man what secretly - was contined in this matter		
24 hrs. per day top about 37 consecrative days which is a dequier occurance due to		
Execused lock down what may lost the a month or more. Then during the wormal course		
of operations I still may be continued in this manual become	LIVE INGERED " EGRESS IS VILT,	
	2/1 300 100 111 100	
I am housed is a cell with another personse yet the cell measures 450g.		
44. or less. The 3PCA soup this is to small that of days. OCA housing standards soup its too small than a men. This posticularly so here on Mess-Custody where under around another		
I am no this cell with another the a mini- of (20) twenty has. DER day: Then on		
Lockdown that occurs rurey (90) whiley days. I am forced to pendure those conditions		
24 has a day fix process at a time. I must small his gas and the smalls mine. The		
ham that is caused by the continensal of two persons i	as such inadequate space has	
been documented in study after study an According in	JAW-502 Ruiz V. Rstelle, 503	
F. sup. 1265; Tilbly V. Owens 907 F. supp. 42 - holding w	news phisology sexular long	
Southeries double - celling on even single celling in a thirty-nine (39) squitti cell was		
much the cell space is not even adequate enough for two people to move cusine		
simultaneously, there is no sitting space on table for withing. The hughest being is		
withoutly predisposed to sitting space become contractational when twent to travetonic under madraguest living space see Former 1. bergan 509 U.D. at 832, 114, 55et		
1000. It is cared and invest nondensit to held a	200 100 100 100 100 100 100 100 100 100	
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CONDITIONS 601786V-001662ROJDL POOCUMENTED RIEDOS/17/2 Helling V. MCKhiney, 509, U.S. 2633, 113 5 ch 2475.	13 Page 1 of 81 Page 10 #1038
Hallow 16 MCV 11 508 11 2 800 110 501 0105	To Day of the Control
Helling V. MCKhinery, 509, 11.5, 2533, 113 5 ch 2475.	30.
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	,
)	
Action Requested to resolve your Complaint.	If these bunks gramared from
my celli as hot I be orniged well.	
Offender Signature: Would White	Date: \$ 8 16
Grievance Response:	
or ievance response.	
The Coffield Unit was built in 1972 and does not provide 35 space per occupant as required in the 1986 Michael style pronon mandatory ACA standard and has been mitigated due to all cubicles/cells daily. They are allowed to exit for such actindoor/outdoor recreation. The Coffield Administration contextreme of hot and cold months. Offenders that are sensitive housed in accordance with their HS18 screen.	ototype facilities. This is a lowing offenders to exit their ivities as showers, and inuous monitoring of temperature
Signature Authority:  Nichards of Pichards of Rights of the Unit Grievance Investigate the reason for appeal on the Step 2 Form.	Date: 8/9/16 estigator within 15 days from the date of the Step 1 response.
Returned because: *Resubmit this form when the corrections are made.	
1. Grievable time period has expired.	,
2. Submission in excess of 1 every 7 days. *	OFFICE USE ONLY
3. Originals not submitted. *	Initial Submission UGI Initials:
4. Inappropriate/Excessive attachments. *	Grievance #:
5. No documented attempt at informal resolution. *	Screening Criteria Used:
6. No requested relief is stated. *	Date Recd from Offender:
7. Malicious use of vulgar, indecent, or physically threatening language. *	Date Returned to Offender:
8. The issue presented is not grievable.	2 <sup>nd</sup> Submission UGI Initials:
9. Redundant, Refer to grievance #	Grievance #:
10. Illegible/Incomprehensible. *	Screening Criteria Used:
	Date Recd from Offender:
11. Inappropriate. *	Date Returned to Offender:
UGI Printed Name/Signature:	3rd Submission UGI Initials:
Application of the screening criteria for this grievance is not expected to adversely	Grievance #:
Affect the offender's health.	Screening Criteria Used:
Medical Signature Authority:	Date Returned to Offender:
:	Date Returned to Offender: